

## IMMUNIZATION CLINICS

ported to have developed within two days of receiving the immunization. Investigation showed that this child had a history of growth retardation, and several developmental disabilities. It was felt that the nephrotic syndrome was not a result of the immunization that he received at the clinic. No diarrhea or other complications were attributed to the polio immunizations.

### Conclusion

It has been shown in Sacramento County, California, that a county-wide school-based immunization program is an effective way of raising community immunization levels. The program enables children to be immunized at no additional direct cost to the parents (because it is funded by tax money). It also enables schools to update records of the children's immunization status and, it is to be hoped, prevents outbreaks of formerly

epidemic diseases (and attendant student absences).

It is usually difficult to evaluate the decreased incidence of diseases that were formerly epidemic in such a short time when general population herd immunity is allegedly high. However, the year 1975 afforded the opportunity to show that during a community rubeola outbreak, the incidence of the disease was low in the population affected by the school immunization clinics, whereas in the junior and senior high school children, the measles case rate was high.

### REFERENCES

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4. Center for Disease Control, Rubella, Measles, Polio Immunization Status Report No. 20, Jun 1973
5. Summary of Immunization Status for Polio, DPT, Measles, and Rubella, United States, 1974. U.S. Immunization Survey, 1974

## Insulin Versus Orally Given Hypoglycemic Drugs in the Treatment of Diabetes

Insulin may be preferable to the use of orally given hypoglycemic drugs in patients in whom normoglycemia is not achieved. . . . An obese patient with diabetes who, on diet, is unable to have reasonable normoglycemic levels and who is symptomatic should certainly have some medication to lower blood glucose levels. My feeling is that in these patients insulin can accomplish the objective, although some of them may already have an increased amount of insulin in their bodies. But we have seen these patients respond to insulin administration with normoglycemia and a disappearance of symptoms.

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